Application Data Sheet

Application Information

Application Type:: Regular

Subject Matter:: Utility

Suggested Classification::

Suggested Group Art Unit::

CD-ROM or CD-R?:: None

Number of CD disks::

Number of Copies of CDs::

Sequence Submission?:: None

Computer Readable Form (CRF):: No

Number of copies of CRF:: 0

Title:: DETECTION SYSTEM WITH VIDEO

CAMERA

Attorney Docket Number:: 2001-1008

Request for Early Publication?:: No

Request for Non-Publication?:: No

Suggested Drawing Figure::

Total Drawing Sheets:: 1

Small Entity?:: No

Latin Name::

Variety Denomination Name::

Petition Included?:: No

Petition Type::

Licensed US Gov't Agency::

Contract or Grant Numbers::

Secrecy Order in Parent Appl.?:: No

Applicant Information

Applicant Authority Type:: Inventor

Primary Citizenship Country:: NETHERLANDS

Status:: Full Capacity

Given Name:: CORNELIS

Middle Name:: SIMON ADRIAAN

Family Name:: DE NOOD

City of Residence:: HARDERWIJK

State or Province of Residence::

Country of Residence:: NETHERLANDS

Street of Mailing KLEINE MARKTSTRAAT 11

Address::

City of Mailing Address:: HARDERWIJK

State or Province of Mailing Address::

Country of Mailing Address:: NETHERLANDS

Postal or Zip Code of Mailing Address:: NL-3841 BD

Applicant Authority Type:: Inventor

Primary Citizenship Country:: NETHERLANDS

Status:: Full Capacity

Given Name:: WILLEM

Middle Name::

Family Name:: ANGEL City of Residence:: ZWOLLE

State or Province of Residence::

Country of Residence:: NETHERLANDS

Street of Mailing SPIEKERBRINK 44

Address::

City of Mailing Address:: ZWOLLE

State or Province of Mailing Address::

Country of Mailing Address:: NETHERLANDS

Postal or Zip Code of Mailing Address:: NL-8034 RB

Correspondence Information

Correspondence Customer Number:: 000466

Representative Information

Representative Customer Number::	000466
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Domestic Priority Information

Application::	Continuity Type::	Parent	Parent Filing
		Application::	Date::
This application	National Stage of	PCT/NL00/00495	7/13/00

Foreign Priority Information

Country::	Application	Filing Date::	Priority
	Number::		Claimed::
NETHERLANDS	1012592	7/13/99	Yes

Assignment Information

Assignee Name::

Street of Mailing Address::

City of Mailing Address::

State or Province of Mailing Address::

Country of Mailing Address::

Postal or Zip Code of Mailing Address::